

MINNESOTA HOUSING FINANCE AGENCY

AFFIRMATIVE FAIR HOUSING MARKETING PLAN

1. INTRODUCTION

State and Federal affirmative fair housing marketing regulations require that each applicant subject to these Regulations carry out an affirmative marketing program to attract prospective buyers or tenants of all minority and non-minority groups to the housing that the applicant is providing. These groups include Whites (Non-Hispanic) and members of minority groups: Blacks (Non-Hispanic), American Indians/Alaskan Natives, Hispanics and Asian/Pacific Islanders in the Standard Metropolitan Statistical Areas (SMSA) or housing market area who may be subject to housing discrimination on the basis of race, color, creed, religion, sex, national origin, marital status, status with regard to public assistance, sexual orientation, disability, or familial status.

2. APPLICATION AND PROJECT IDENTIFICATION:

A. NAME OF APPLICANTS <div style="text-align: center;">XYZ Limited Partnership</div>	B. PROJECT OR APPLICATION NUMBER <div style="text-align: center;">02-LIMR-3434</div>
<div style="text-align: center;">or Owner Name</div>	NUMBER OF UNITS (Indicate family, elderly, etc.) <div style="text-align: center;">54 - family</div>
ADDRESS (Include City, State and ZIP Code) <div style="text-align: center;">123 Lane South St. Louis Park, MN 00000</div>	PRICE OR RENTAL RANGE OF UNITS: FROM \$ <u>400</u> TO \$ <u>600</u>
TELEPHONE NUMBER <div style="text-align: center;">952-123-4567</div>	D. FOR MULTIFAMILY HOUSING ONLY: <input type="checkbox"/> ELDERLY <input checked="" type="checkbox"/> NON-ELDERLY
C. PROJECT NAME <div style="text-align: center;">Stars & Stripes Apartments</div>	E. APPROXIMATE STARTING DATES ADVERTISING <u>1-02</u> OCCUPANCY <u>2-02</u>
	F. NAME OF MANAGING/SALES AGENT <div style="text-align: center;">Great Housing Management Company</div>
LOCATION / ADDRESS (Include City, State and ZIP Code) <div style="text-align: center;">345 West 8th Street Minneapolis, MN 11122</div>	ADDRESS (Include City, State and ZIP Code) <div style="text-align: center;">4455 South Lawn St. Paul, MN 22211</div>
COUNTY <div style="text-align: center;">Hennepin</div>	G. MHFA PROGRAM (s) USED TO FINANCE <div style="text-align: center;">Tax Credits LMIR First Mortgage</div>

3. TYPE OF AFFIRMATIVE MARKETING PLAN

☒ Project Plan; ☐ Annual Plan (for single family scattered site units). [Reference Table 1](#)
NOTE: A separate Annual Plan must be developed for each area in which the housing is to be built. [“Minority % by County”](#)

☐ Minority Area ☐ White (non-minority) Area ☐ Mixed Area (with _____% minority residents)

4. DIRECTION OF MARKETING ACTIVITY

Indicate below which group(s) in the housing market area are least likely to apply for the housing because of its location and other factors without special outreach efforts.

☐ White (Non-Hispanic)
☒ African American (Non-Hispanic)
☒ American Indian or Alaskan Native
☒ Hispanic
☒ Asian or Pacific Islander

* Failure to complete each section will delay approval of the AFHMP.

Fair Housing Exhibit—Affirmative Fair Housing Marketing Plan 8/2002

5. MARKETING PROGRAM**A. COMMERCIAL MEDIA**

Check the media to be used to advertise the availability of this housing.

☒ Newspaper(s)/Publication(s) ☐ Radio ☐ TV ☐ Billboard(s) ☐ Other (Specify)

NAME OF NEWSPAPER,
RADIO OR TV STATION

RACIAL/ETHNIC IDENTIFICATION OF
READERS/AUDIENCE

SIZE/DURATION
OF ADVERTISING

Reference “Underserved Communities Media List” located on MHFA web site (click on “Property Management” then click on “Property Management” then “Forms” then “Community Contacts” link.

B. BROCHURES, SIGNS AND HUD'S FAIR HOUSING POSTER:

(1) Will brochures, leaflets, or handouts be used to advertise? ☐ Yes ☐ No. If yes, attach a copy or submit when available. (2) For project site sign, indicate sign size _____x_____; Logotype size _____x_____. (3) HUD's Fair Housing Poster must be conspicuously displayed wherever sales/rentals and showings take place. Fair Housing Posters will be displayed in the ☐ Sales/Rental Office(s); ☐ Real Estate Office(s); ☐ Model Unit(s); ☐ Other (Specify) _____

C. COMMUNITY CONTACTS

To further inform the group(s) least likely to apply about the availability of the housing, the applicant agrees to establish and maintain contact with the groups/organizations listed below that are located in the housing market area or SMSA. If more space is needed, attach an additional sheet. Notify MHFA of any changes in this list. Attach a copy of correspondence to be mailed to these groups/organizations. (Provide all requested information.)

NAME OF GROUP/ORGANIZATION

RACIAL/ETHNIC
IDENTIFICATION

APPROXIMATE DATE OF
CONTACT OR PROPOSED
CONTACT

PERSON CONTACTED OR TO
BE CONTACTED

Reference “Underserved Communities Media List” located on MHFA web site (click on “Property Management” then click on “Property Management” then “Forms” then “Community Contacts” link.

ADDRESS AND TELEPHONE NUMBER

METHOD OF CONTACT(S)

INDICATE THE SPECIFIC FUNCTION GROUP/ORGANIZATION
WILL UNDERTAKE IN IMPLEMENTING THE MARKETING

List a minimum of three groups, refer back to Section 4 to see which groups were determined to be “least likely to apply” without special outreach.
A specific person and method of contact need to be indicated.
(A sample correspondence letter is attached.)

6. FUTURE MARKETING ACTIVITIES (Rental Units Only)

Check the block(s) that best describe future marketing activities to fill vacancies as they occur after the project has been initially occupied.

- ☒ Newspapers/Publications
 ☐ Radio
 ☐ TV
 ☐ Brochures/Leaflets/Handouts
 ☒ Site Signs
☒ Community Contacts
 ☐ Others (*Specify*) _____

7. EXPERIENCE AND STAFF INSTRUCTIONS

A. Indicate any experience in marketing housing to the group(s) identified as least likely to apply.

NONE, if applicable (or)

We currently manage and/or own two other developments.

- 1) “Wonderful Apartments” in St. Cloud, MN, which is 80 apartments and has 18 percent current minority households.
- 2) “Spotless Townhomes” in International Falls, MN, which is 20 townhouses and has 20 percent minority households.

B. Indicate training to be provided to staff on federal, state and local fair housing laws and regulations, as well as this AFHM Plan. Attach a copy of the instructions to staff regarding fair housing.

8. ADDITIONAL CONSIDERATIONS:**9. ANTICIPATED OR ACTUAL RESIDENT DEMOGRAPHICS**

Please list the number of persons (by head of household), use real numbers not percentages, which you anticipate will occupy or presently occupy the units as a result of your affirmative marketing efforts.

9a) Relates directly to the total development unit count.

9b) Would not necessarily equal total unit count

9a) _____ White _____ Blacks _____ Asians _____ American Indians _____ Hispanics

9b) _____ Disabled _____ Single-Headed Households _____ Persons on Public Assistance

10. SIGNATURES

By signing this form, the applicant agrees, after appropriate consultation with MHFA, to change any part of the plan covering a project to assure continued compliance with affirmative fair housing marketing regulations.

SIGNATURE OF PERSON SUBMITTING PLAN

NAME (TYPE OR PRINT)

TITLE AND COMPANY

DATE

MHFA USE ONLY

APPROVAL BY

SIGNATURE

DISAPPROVAL BY

SIGNATURE

NAME (TYPE OR PRINT)

NAME (TYPE OR PRINT)

TITLE

TITLE

DATE

DATE

